



CERTIFICATE OF MAILING			
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Typed or Printed Name	Susan M. Alessi		
Signature	<i>Susan Alessi</i>	Date	02-07-2003
REVOCATION OF POWER OF ATTORNEY/POWER OF ATTORNEY OR AUTHORIZATION OF AGENT Commissioner for Patents Washington D.C. 20231		Attorney Docket	VITA-006
		First Named Inventor	LU, PETER S.
		Application Number	09/736,968
		Filing Date	December 13, 2000
		Group Art Unit	1647
		Examiner Name	BUNNER, BRIDGET E.
		Title: "CLASP-7 TRANSMEMBRANE PROTEIN"	
I hereby <u>revoke</u> all previous powers of attorney or authorizations of agent given in the above-identified application and <u>hereby appoint</u> Practitioners at:			
<input checked="" type="checkbox"/>	24353	PLEASE PRINT NUMBER AND CODE 24353 PATENT & TRADEMARK OFFICE	
whose address is: Bozicevic, Field & Francis LLP, 200 Middlefield Road, Suite 200, Menlo Park, CA 94025 as its attorney(s) or agent(s) to prosecute the application identified above, to prepare and file amendments, to inspect and make copies thereof and of any papers in any appellate or <i>inter partes</i> proceedings in which the Application may be or become involved, and generally to conduct all business in the United States Patent and Trademark Office relating to the prosecution of the application or any application that claims priority from this application.			
<input checked="" type="checkbox"/> Please change the correspondence address for the above-identified application to the above-mentioned customer number.			
STATEMENT UNDER 37 CFR § 3.73(b)			
In accordance with 37 CFR §3.73(b) I hereby certify that I am empowered to act on behalf of the Assignee of the above-identified patent application. The Assignment was recorded with the U.S. Patent Office on May 7, 2001 at Reel 011780, Frames to 0663.			
I declare that these statements are made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code §1001 and that such willful false statements may jeopardize the validity of the above referenced application or any patent resulting from that application.			
I am the: <input type="checkbox"/> Applicant; or <input checked="" type="checkbox"/> Assignee of record of the entire interest <input type="checkbox"/> Attorney of record			
SIGNATURE of Applicant, Assignee or Attorney of Record			
Name	Peter S. Lu		
Signature	<i>Peter S. Lu</i>		
Date	2/5/03		

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